

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FORWARD PHILADELPHIA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608927	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Canal Partners Media</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 21 / 2016</b>		
Mailing Address 25 Whitlock Place, SW S201			Amount 8000.00		
City Marietta	State GA	Zip Code 30064	Transaction ID : SE.4116		
Purpose of Expenditure Radio Ad Buy: Choice		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 21 / 2016</b>		
Name of Federal Candidate DWIGHT EVANS			<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 02 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate			<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	8000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sean Gavin

[Electronically Filed]

Date

MM / DD / YYYY  
04 / 21 / 2016

Signature